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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/663,866			ing Date 15/2003	To be Mailed	
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY			OTHER THAN OR SMALL ENTITY		
FOR			NUMBER FILED		NUMBER EXTRA		RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)	
BASIC FEE (37 CFR 1 16(a), (b), or (c))			N/A		N/A	1	N/A		1	N/A		
SEARCH FEE (37 CFR 1 16(k), (i), or (m))			N/A		N/A	1	N/A]	N/A		
EXAMINATION FEE (37 CFR 1,16(o), (p), or (q))			N/A		N/A		N/A]	N/A		
TOTAL CLAIMS (37 CFR 1.16(i))			minus 20 ≈]	x \$ = 1		OR	x s =		
INDEPENDENT CLAIMS (37 CFR 1.16(h))			m	inus 3 = *		1	X \$ = 1		1	X S =		
	APPLICATION SIZE (37 CFR 1.16(s))	FEE sh	eets of pap \$250 (\$125 ditional 50	specification and drawings exceed 100 s of paper, the application size fee due 0 (\$125 for small entity) for each snal 50 sheets or fraction thereof. See S.C. 41(a)(1)(G) and 37 CFR 1.16(s).								
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))						•			J			
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL		J	TOTAL		
APPLICATION AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SMAL	L ENTITY	OR		ER THAN ALL ENTITY	
AMENDMENT	01/21/2011	CLAIMS REMAINING AFTER AMENDMEN	т	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16(i))	* 18	Minus	** 20	= 0]	x s =		OR	X \$52=	0	
	Independent (37 CFR 1.16(h))	- 3	Minus	3	- 0	1	X \$ =		OR	X \$220=	0	
	Application Size Fee (37 CFR 1.16(s))											
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))						1		OR			
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0	
		(Column 1)		(Column 2)	(Column 3)							
AMENDMENT		CLAIMS REMAINING AFTER AMENDMEN		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1,16(i))		Minus		-		X \$ =		OR	x s =		
M	Independent (37 CFR 1 16(h))		Minus	***	-]	X \$ =		OR	x s =		
Ē	Application Size Fee (37 CFR 1.16(s))					l			1			
Ą	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(ii))					l			OR			
									OR	TOTAL ADD'L FEE		
** If	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ***Life **Highest Number Previously Paid For In THIS SPACE is less than 20, enter "20". **Life **Highest Number Previously Paid For In THIS SPACE is less than 3, enter "3". **The **Highest Number Previously Paid For I' THIS SPACE is less than 3, enter "3". **The **Highest Number Previously Paid For I' Total or Independent) is the highest number found in the appropriate box in column 1.											

This collection of information is required by 37 CFR 11.6. The information is required to obtain or retain a benefit by the public which is to file (and by the USE) process) an application. Confidentially 35 opened by 35 opened by 35 CFR 2nd 37 GFR 11.4. This collection is estimated to take 12 namidates to complete, including gathering, preparing, and submitting the completed application form to the USE 17.0. Time will wary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burdon, should be sent to the CFR Information CFR U.S. Patient and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandrius, VA 22319.4. Bob. D.O. NOT ISSO, JASSA 22319.1. BOX TO COMMISSION OF COMMISSION OF The CFR INFORMATION OF COMMISSION OF COMMISSION OF THE CFR INFORMATION OF COMMISSION OF THE CFR INFORMATION OF COMMISSION OF THE CFR INFORMATION OF CF